## RECEIVED CENTRAL FAX CENTER

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAR 2 7 2007

In re: Application of:

Group Art Unit: 1734

Applicant:

Jay A. Morrison, et al.

Examiner: Mayes, Melvin C.

Serial No.:

10/767,013

Atty. Docket: 2003P17582US

Filed:

01/29/2004

Confirmation No.: 4733

Title:

HYBRID STRUCTURE USING CERAMIC TILES AND METHOD

OF MANUFACTURE

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

### CERTIFICATE OF FACSIMILE TRANSMISION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office fax number 571-273-8300 on the date shown below.

This cover sheet (1 page)

Fee Transmittal Sheet (1 page)

Response under 37 CFR 1.111 (11 pages)

David G. Maire, Reg. No. 34,865

Date

Beusse Wolter Sanks Mora & Maire, P.A.

390 North Orange Ave., Suite 2500

Orlando, FL 32801

telephone: 407-926-7704

200

Each independent claim over 3 (including Reissucs)

Extra Claims

Bach claim over 20 (including Reissucs)

Provisional

Total Claims

Foe Description

2. EXCESS CLAIM FEES

Multiple dependent claims

- 20 or HP =

100

PTO/SB/17 (02-07)
Approved for use strough 02/28/2007. OMB 0661-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
A connection of information

Small Entity

Fee (\$)

25

100

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Fee Paid (\$)

Multiple Dependent Claims

Eve (\$)

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Fee (\$)

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POES PLATEMENT TO THE CONSCIONATION ACT, 2006 (H ft. 4818).  FEE TRANSMITTAL  For FY 2007			1	spend to a collection of information unless it displays a valid OMB control number Complete if Known			
				Application Number 10/		767,013	
			Flling Date	01	01/29/2004		
			First Name	a inventor Ja	Jay A. Morrison		
	Examiner N	ame M	me Melvin C. Mayes				
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TOTAL AMOUNT OF PAYE	AENT (\$)	400.00	Attomey D	ocket No. 20	03P17582US	***	
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FEE CALCULATION  1. BASIC FILING, SEAF	RCH, AND	EXAMINATION FEI	EARCH FEES		VATION FEES		
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Utility	300	150 5	500 250	200	100	<del></del>	
Design	200	100	100 50	130	65		
Plant	200	100 3	300 150	160	80		
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HP = nightest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Fee (5) Indeo, Claims 400 200 -3 or HP = HP - highest number of independent claims paid for, if greater than 3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extre Sheets Number of each additional 50 or fraction thereof Fee Paid (\$)

Fee Paid (\$)

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(round up to a whole number) x **150 ≤** Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): SUBMITTED BY

Registration No. Telephone 407-738-8449 44.961 Signature Date 3/27/07 Name (Print/Type) John P. Musons

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### **RESPONSE UNDER 37 CFR 1.111**

#### INTRODUCTORY COMMENTS

This paper is in response to the Office Communication mailed 12/27/2006.

#### IN THE CLAIMS

Please amend the claims as shown beginning on the following page.

(please proceed to page 2)

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